

Appl. No. 09/916,136
Amendment Dated June 23, 2004
Reply to Office Action of February 2004




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Jfw

Appl. No. : 09/916,136 Confirmation No. 8218
Applicant : Rocha et al.
5 Filed : 07/26/2001
TC/A.U. : 1617
Examiner : Shengjun Wang

10 Docket No. : 3357/1/US
Customer No. : 26648

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

15 I hereby certify that this correspondence is being deposited with the United States
Postal Service as "First Class" in an envelope addressed to: Commissioner
of Patents, P.O. Box 1450, Alexandria V.A. 22313.
Michelle R. Becker

20  Date: June 23, 2004

AMENDMENT D

Sir:

25 In response to the Office Action mailed July February 23, 2004, please amend the
above-identified application as follows:

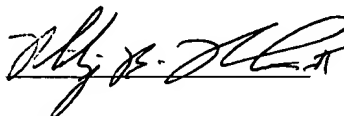
30 **Amendment to the Specification** begins on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims, which begins on page 3
of this paper.



35 **Remarks/Arguments** begin on page 7 of this paper.

An Extension of Time to Reply to the Office Action mailed February 23, 2004 of one
(1) month, up to and including June 23, 2004 is hereby requested.

40 Any fees for the making of this amendment, including the extension of time, are hereby
authorized to be charged to Deposit Account No. 19-1025.

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Philip B. Polster II
Reg. No. 43,864
Attorney for Applicant

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 3357/1/US	
Applicant(s): Rocha et al				JUN 28 2004	
Serial No. 09/916,136	Filing Date 7/26/2001	Examiner S. Wang	Group Art Unit 1617		
Invention: ALDOSTERONE BLOCKER THERAPY TO PREVENT OR TREAT INFLAMMATION-RELATED DISORDERS					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	17 -	71 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-1025 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature Philip B. Polster, II Registration No. 43,864 Customer No. 26648			Dated: June 23, 2004		
CC:			I certify that this document and fee is being deposited on June 23, 2004 with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  Signature of Person Mailing Correspondence Michelle R. Becker Typed or Printed Name of Person Mailing Correspondence		